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CONFIRMATION NO. 3921

<b>SERIAL NUMBER</b> 10/752,134	<b>FILING OR 371(c) DATE</b> 01/06/2004 <b>RULE</b>	<b>CLASS</b> 062	<b>GROUP ART UNIT</b> 3744	<b>ATTORNEY DOCKET NO.</b> 10,665A
<b>APPLICANTS</b> Abbas A. Alahyari, Manchester, CT; Mary D. Saroka, Manchester, CT;  <b>** CONTINUING DATA *****</b> This application is a CIP of 10/374,640 02/26/2003 ABN <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/08/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>wer</u> Allowance Acknowledged <u>wer</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 4
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 30956				
<b>TITLE</b> Refrigerated display merchandiser with improved air curtain				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	